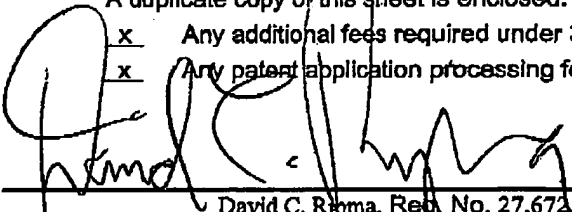
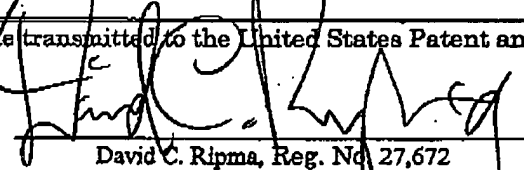


AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): Guy Eden			Docket No. SLA1014		
Serial No 09/859,660	Filing Date May 18, 2001	Examiner Ramsey Refai	Group Art Unit 2154 RECEIVED CENTRAL FAX CENTER OCT 20 2004		
Invention: System and Method for Discovering Available Network Components					
TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER OF EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	24 -	26 =	0	x \$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$88.00	\$0.00
Multiple Dependent Claims (check if applicable) _____					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; flex-direction: row;"> <div style="flex: 1;"> <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 50-0803 in the amount of \$0.00. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0803. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 C.F.R. 1.17. </div> <div style="flex: 1; text-align: right; padding-top: 20px;"> Dated: October 20, 2004 David C. Ripma, Reg. No. 27,672 </div> </div>					
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office under 37 C.F.R. §1.8 at Fax No. (703) 872-9306 on October 20, 2004.					
<div style="display: flex; justify-content: space-between;"> <div> <p>Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper. The papers submitted include:</p> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> This Amendment Transmittal Letter (Include Duplicate) <input checked="" type="checkbox"/> Response under 37 CFR § 1.111 <input checked="" type="checkbox"/> Attachments </div> <div style="text-align: right;"> 2 page(s) 16 page(s) 5 page(s) pages </div> </div> </div> <div style="text-align: center; font-size: 2em; font-weight: bold;"> BEST AVAILABLE COPY </div> </div>					
Total pages, including this Transmittal: 23					

AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): Guy Eden			Docket No. SLA1014		
Serial No 09/859,660	Filing Date May 16, 2001	Examiner Ramsey Refai	Group Art Unit 2154		
Invention: System and Method for Discovering Available Network Components					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER OF EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	24 -	26 =	0	x \$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$88.00	\$0.00
Multiple Dependent Claims (check if applicable) _____					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 50-0803 in the amount of \$0.00. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0803. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 C.F.R. 1.17.					
 David C. Ripma, Reg. No. 27,672			Dated: <u>October 20, 2004</u>		
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office under 37 C.F.R. § 1.8 at Fax No. (703) 872-9806 on October 20, 2004.					
 David C. Ripma, Reg. No. 27,672					
Note: Each annex must have its own certificate of transmittal, or this certificate must identify each annex transmittal. The annexes submitted:					
<input checked="" type="checkbox"/> This Amendment Transmittal Letter (Include Duplicate)				2 page(s)	
<input checked="" type="checkbox"/> Response under 37 CFR § 1.111				16 page(s)	
<input checked="" type="checkbox"/> Attachments				5 page(s)	
_____				pages	
Total pages, including this Transmittal: 23					

IN THE UNITED STATES PATENT AND TRADEMARK OFFICERECEIVED
CENTRAL FAX CENTER
OCT 20 2004

In Re Application of:)	
)	
Inventors: Guy Eden)	
)	
Serial No.: 09/859,660)	ATTORNEY FILE NO.
)	SLA1014
Filed: May 16, 2001)	
)	Customer No.: 27518
Title: SYSTEM AND METHOD FOR)	Examiner: Refai, Ramsey
DISCOVERING NETWORK)	Group Art: 2154
COMPONENTS)	Confirmation No.: 3934
)	

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND REQUEST FOR RECONSIDERATION

In response to an Office Action filed September 20, 2004,
please amend the application and reconsider as follows.

Amendments to the claims begin at page 2 of this paper.

Remarks begin at page 10 of this paper.

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- ☐ **BLACK BORDERS**
- ☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- ☐ **FADED TEXT OR DRAWING**
- ☐ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- ☐ **SKEWED/SLANTED IMAGES**
- ☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- ☐ **GRAY SCALE DOCUMENTS**
- ☐ **LINES OR MARKS ON ORIGINAL DOCUMENT**
- ☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- ☐ **OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.